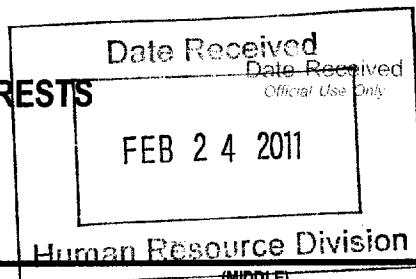


STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE



Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Jelincic, Jr. Joseph John

1. Office, Agency, or Court

Agency Name

California Public Employees' Retirement System

Division, Board, Department, District, if applicable

Your Position

Board of Administration

Member

► If filing for multiple positions, list below or on an attachment.

Agency: California Public Employees' Retirement System

Position: Investment Officer

2. Jurisdiction of Office (Check at least one box)

☒ State

☐ Judge (Statewide Jurisdiction)

☐ Multi-County

☐ County of

☐ City of

☐ Other

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2010, through December 31, 2010.

-or-

The period covered is / / , through December 31, 2010.

☐ Leaving Office: Date Left / / (Check one)

☐ The period covered is January 1, 2010, through the date of leaving office.

☐ The period covered is / / , through the date of leaving office.

☐ Assuming Office: Date / /

☐ Candidate: Election Year

Office sought, if different than Part 1:

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 5

☒ Schedule A-1 - Investments - schedule attached

☐ Schedule C - Income, Loans, & Business Positions - schedule attached

☒ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE  
(Business or Agency Address Recommended - Public Document)

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 2/24/11  
(month, day, year)

Signature

**SCHEDULE A-1****Investments****Stocks, Bonds, and Other Interests**

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name <u>Joseph J. Jelincic, Jr.</u>

► NAME OF BUSINESS ENTITY  
Savings Plus Program

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Deferred compensation program run by DPA

FAIR MARKET VALUE  
☒ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Stock      ☒ Other Bond index fund  
(Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
       /        / 10             /        / 10  
ACQUIRED                      DISPOSED

► NAME OF BUSINESS ENTITY  
Savings Plus Program

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Deferred compensation program run by DPA

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Stock      ☒ Other Mid cap index fund  
(Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
       /        / 10             /        / 10  
ACQUIRED                      DISPOSED

► NAME OF BUSINESS ENTITY  
Savings Plus Program

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Deferred compensation program run by DPA

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Stock      ☒ Other international stock index fund  
(Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
       /        / 10             /        / 10  
ACQUIRED                      DISPOSED

► NAME OF BUSINESS ENTITY  
Savings Plus Program

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Deferred compensation program run by DPA

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Stock      ☒ Other small cap stock index fund  
(Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
       /        / 10             /        / 10  
ACQUIRED                      DISPOSED

► NAME OF BUSINESS ENTITY  
Savings Plus Program

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Deferred compensation program run by DPA

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Stock      ☒ Other large cap stock index fund  
(Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
       /        / 10             /        / 10  
ACQUIRED                      DISPOSED

► NAME OF BUSINESS ENTITY  
Savings Plus Program

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Deferred compensation program run by DPA

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Stock      ☒ Other Short term investment fund  
(Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
11 / 3 / 10             /        / 10  
ACQUIRED                      DISPOSED

Comments: \_\_\_\_\_

**SCHEDULE A-2**  
**Investments, Income, and Assets**  
**of Business Entities/Trusts**  
(Ownership Interest is 10% or Greater)

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name  Joseph J. Jelincic, Jr.

► 1. BUSINESS ENTITY OR TRUST

Jelincic Family Trust

Name  
21966 Delores St.; Castro Valley, CA

Address (Business Address Acceptable)

Check one

☒ Trust, go to 2    ☐ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/10    \_\_\_\_/\_\_\_\_/10  
ACQUIRED    DISPOSED

NATURE OF INVESTMENT

☐ Sole Proprietorship    ☐ Partnership    ☐ Other

YOUR BUSINESS POSITION \_\_\_\_\_

► 1. BUSINESS ENTITY OR TRUST

Jelincic Family Trust

Name  
21966 Delores St.; Castro Valley, CA

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2    ☐ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/10    \_\_\_\_/\_\_\_\_/10  
ACQUIRED    DISPOSED

NATURE OF INVESTMENT

☐ Sole Proprietorship    ☐ Partnership    ☐ Other

YOUR BUSINESS POSITION \_\_\_\_\_

► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

- ☐ \$0 - \$499    ☐ \$10,001 - \$100,000  
☒ \$500 - \$1,000    ☐ OVER \$100,000  
☐ \$1,001 - \$10,000

► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

- ☐ \$0 - \$499    ☐ \$10,001 - \$100,000  
☒ \$500 - \$1,000    ☐ OVER \$100,000  
☐ \$1,001 - \$10,000

► 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

► 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT    ☒ REAL PROPERTY

606 700 431

Name of Business Entity or  
Street Address or Assessor's Parcel Number of Real Property

Grass Valley, CA

Description of Business Activity or  
City or Other Precise Location of Real Property

FAIR MARKET VALUE

- ☒ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/10    \_\_\_\_/\_\_\_\_/10  
ACQUIRED    DISPOSED

NATURE OF INTEREST

☒ Property Ownership/Deed of Trust    ☐ Stock    ☐ Partnership

☐ Leasehold \_\_\_\_\_    ☐ Other \_\_\_\_\_  
Yrs. remaining

☐ Check box if additional schedules reporting investments or real property are attached

► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT    ☒ REAL PROPERTY

606 700 441

Name of Business Entity or  
Street Address or Assessor's Parcel Number of Real Property

Grass Valley, CA

Description of Business Activity or  
City or Other Precise Location of Real Property

FAIR MARKET VALUE

- ☒ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/10    \_\_\_\_/\_\_\_\_/10  
ACQUIRED    DISPOSED

NATURE OF INTEREST

☒ Property Ownership/Deed of Trust    ☐ Stock    ☐ Partnership

☐ Leasehold \_\_\_\_\_    ☐ Other \_\_\_\_\_  
Yrs. remaining

☐ Check box if additional schedules reporting investments or real property are attached

Comments: \_\_\_\_\_

# SCHEDULE D Income – Gifts

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name <u>Joseph J. Jelincic, Jr.</u>

► NAME OF SOURCE  
Donna Snodgrass

ADDRESS (Business Address Acceptable)  
10345 Walnut Grove Ct.; Yucaipa, CA 92399

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Employee Association Officer

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>6 / 1 / 10</u>	<u>\$ 200</u>	<u>Ticket to fundraiser</u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE  
Relational Investors

ADDRESS (Business Address Acceptable)  
12400 High Bluff Dr; #6005; San Diego, CA 92130

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Money Manager

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>4 / 12 / 10</u>	<u>\$ 60</u>	<u>meal</u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE  
CSEA Retirees, Chapter 2

ADDRESS (Business Address Acceptable)  
1200 Los Rios Dr; Carmichael, CA 95608

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Retiree Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>2 / 1 / 10</u>	<u>\$ 9</u>	<u>Meal</u>
<u>5 / 3 / 10</u>	<u>\$ 9</u>	<u>Meal</u>
<u>6 / 7 / 10</u>	<u>\$ 9</u>	<u>Meal</u>

► NAME OF SOURCE  
LA Trustees Network

ADDRESS (Business Address Acceptable)  
3460 Fletcher Ave.; El Monte, CA 91731

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Educational non-profit

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>3 / 1 / 10</u>	<u>\$ 21</u>	<u>meal</u>
<u>3 / 1 / 10</u>	<u>\$ 25</u>	<u>reception</u>
<u>3 / 2 / 10</u>	<u>\$ 18</u>	<u>meal</u>

► NAME OF SOURCE  
LA Trustees Network

ADDRESS (Business Address Acceptable)  
3460 Fletcher Ave.; El Monte, CA 91731

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Educational non-profit

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>3 / 2 / 10</u>	<u>\$ 18</u>	<u>meal</u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE  
CSEA Retirees, Chapter 2

ADDRESS (Business Address Acceptable)  
1200 Los Rios Dr; Carmichael, CA 95608

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Retiree Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>7 / 5 / 10</u>	<u>\$ 9</u>	<u>Meal</u>
<u>8 / 2 / 10</u>	<u>\$ 9</u>	<u>Meal</u>
<u>11 / 1 / 10</u>	<u>\$ 9</u>	<u>Meal</u>

Comments: pg 1 of 2

# SCHEDULE D Income – Gifts

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name Joseph J. Jelincic, Jr.
--

► NAME OF SOURCE

CSEA Retirees, Chapter 2

ADDRESS (Business Address Acceptable)

1200 Los Rios Dr, Carmichael, CA 95608

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Retiree Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 6 / 10	\$ 25	meal
/  /	\$	
/  /	\$	

► NAME OF SOURCE

Retired Public Employees' Association of California

ADDRESS (Business Address Acceptable)

300 "T" Street; Sacramento, CA 95811

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Retiree Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
5 / 18 / 10	\$ 41	Reception
6 / 17 / 10	\$ 25	meal
6 / 18 / 10	\$ 25	meal

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/  /	\$	
/  /	\$	
/  /	\$	

► NAME OF SOURCE

Retired Public Employees' Association of California

ADDRESS (Business Address Acceptable)

300 "T" Street; Sacramento, CA 95811

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Retiree Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
6 / 18 / 10	\$ 25	meal
/  /	\$	
/  /	\$	

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/  /	\$	
/  /	\$	
/  /	\$	

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/  /	\$	
/  /	\$	
/  /	\$	

Comments: page 2 of 2 for schedule D